Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549	
-------------	------------	--

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>KILTS JAMES M</u>						2. Issuer Name and Ticker or Trading Symbol Advantage Solutions Inc. [ADV]									all applicable) Director		ng Person(s) to Issu 10% Owr		
(Last) 15310 B. SUITE 1	_	st) (I PARKWAY	Middle)			te of E 4/202		t Trans	action (N	Month	/Day/Year)				Office below	er (give title		Other (below)	specify
(Street) IRVINE (City)	C.A.		2618 Zip)		4. If A	Amend	ment,	Date o	of Origina	al File	d (Month/Da	y/Year)	6. Indi Line) X	Form	or Joint/Group Filing (Check Applicable in filed by One Reporting Person in filed by More than One Reporting son			
(Oity)	(0.0			n-Deriva	tive S	Secui	rities	s Aca	uired.	Dis	posed of	or E	Bene	ficially	/ Own	ed			
1. Title of Security (Instr. 3)				2. Transac Date	2. Transaction 2 Date E (Month/Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)		A) or	5. Amo Securit Benefic	ount of ties cially I Following	Form:	Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							Code	v	Amount	(A) (D)	A) or Price		Transa	ction(s) 3 and 4)					
Class A C	03/04/2	2022				P		43,791	A \$5		\$5.69 ⁽¹⁾	119,920]	D				
Class A Common Stock 03/07/					2022				P		56,209	A	. \$	S5.59 ⁽²⁾	(2) 176,129		1	D	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year) (Month/Day/Year) 3. Transaction Execution Date, if any (Month/Day/Year)		ion Date,	4. Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) o Disp of (D	osed) r. 3, 4	6. Date Exercisable ar Expiration Date (Month/Day/Year)		ate	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		De Se (In	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y O F D oi (i)	0. Dwnership orm: Direct (D) r Indirect) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code		v	(A)	(D)	Date Exercis	able	Expiration		Amo or Num of Shar	ber						

Explanation of Responses:

- 1. Represents the weighted average purchase price of the shares purchased ranging from a low of \$5.59 to a high of \$5.78 per share. The Reporting Person undertakes, upon request by the Commission staff, the Issuer or a security holder of the Issuer, to provide full information regarding the number of shares purchased at each separate price.
- 2. Represents the weighted average purchase price of the shares purchased ranging from a low of \$5.44 to a high of \$5.73 per share. The Reporting Person undertakes, upon request by the Commission staff, the Issuer or a security holder of the Issuer, to provide full information regarding the number of shares purchased at each separate price.

/s/David West, Title: Attorney 03/08/2022 in Fact

Date

** Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.